

REQUEST FOR APPROVAL OF FOREIGN TRAVEL
(ER 55-1-2, SEE INSTRUCTIONS ON REVERSE)

TO:	FROM:	DATE:
-----	-------	-------

1. NAME(s) AND OFFICE SYMBOL(s) OF TRAVELER(s):

2. PURPOSE:

3. JUSTIFICATION:

(Additional information may be provided as an attachment on plain bond paper.)

4. DATES OF TDY:	5. DESTINATION(s):
------------------	--------------------

6. FUND SOURCE(s):

☐ CIVIL ☐ MILITARY ☐ REIMBURSABLE: _____

7. ESTIMATED COST:	8. INVITATIONAL TRAVEL ORDER: <input type="checkbox"/> YES <input type="checkbox"/> NO
--------------------	--

9. RECOMMENDED APPROVAL LEVEL: <input type="checkbox"/> MSC/LAB <input type="checkbox"/> HQUSACE <input type="checkbox"/> ASA(CW)

10. OTHER USACE PARTICIPANT(s) <i>(Name(s) and Office Symbol(s))</i> :
--

11. I HAVE REVIEWED THE NEED FOR THIS TRAVEL AND RECOMMEND APPROVAL.		
--	--	--

COMMANDER/DIRECTOR <i>(Type name, rank and title)</i>	SIGNATURE	DATE
---	-----------	------

12. HQUSACE APPROVAL <i>(Type name, rank and title)</i>	SIGNATURE	DATE
---	-----------	------

13. HQDA APPROVAL <i>(Type name, rank and title)</i>	SIGNATURE	DATE
--	-----------	------

INSTRUCTIONS

1. SELF EXPLANATORY. ALL TRAVELERS FROM ONE MSC, DISTRICT, LABORATORY, OR FOA ARE TO BE INCLUDED ON ONE FORM.

2. INSTRUCTIONS ARE THE SAME AS FOR BLOCK 9 OF DD FORM 1610.

3. SPECIFY WHY THE TRAVEL IS NECESSARY AND THE IMPACT OF MISSION ACCOMPLISHMENT IF TRAVEL IS DISAPPROVED. FOR TRAVEL WITH MULTIPLE DESTINATIONS, JUSTIFICATIONS MUST BE PROVIDED FOR EACH DESTINATION. INCLUDE ANY CONTEMPLATED LAYOVERS OR ANNUAL LEAVE THAT WILL BE TAKEN IN CONJUNCTION WITH THE OFFICIAL TRAVEL; IF NONE, INDICATE "NO LAYOVERS OR ANNUAL LEAVE WILL BE TAKEN IN CONJUNCTION WITH OFFICIAL TRAVEL."

4. PROVIDE DATES OF ALL ARRIVALS AND DEPARTURES, EXCEPT TRANSIT POINTS. INCLUDE ANY CONTEMPLATED LAYOVERS OR ANNUAL LEAVE TO BE TAKEN IN CONJUNCTION WITH OFFICIAL TRAVEL.

5. INDICATE TDY STATIONS. DO NOT INCLUDE STOPOVERS EN ROUTE FOR THE PURPOSE OF AWAITING TRANSPORTATION.

6. INDICATE WHETHER THE FUND SOURCE WILL BE FROM MILITARY OR CIVIL WORKS APPROPRIATIONS OR FROM REIMBURSABLE SOURCES. IF REIMBURSABLE FUNDING IS TO BE USED, IDENTIFY THE U.S. AGENCY, FOREIGN GOVERNMENT, OR OTHER SOURCE OF THE FUNDS.

7. PROVIDE THE ESTIMATED COST THAT WILL BE INDICATED IN BLOCK #14 OF DD FORM 1610. IF COSTS ARE SPLIT BETWEEN MILITARY, CIVIL, AND/OR REIMBURSABLE FUNDS, INDICATE SPLIT OF FUNDS IN BLOCK #3. IF PURPOSE IS SPLIT BETWEEN TRAVEL WHICH IS IN DIRECT SUPPORT OF U.S. FORCES OVERSEAS AND OTHER PURPOSES, INDICATE SPLIT OF FUNDING BY PURPOSE IN BLOCK #3.

8. IF YES, INDICATE MAILING ADDRESS OF TRAVELER(S) IN BLOCK #1. PROVIDE AS AN ENCLOSURE ON PLAIN BOND PAPER SPECIFICS ON THE NEED FOR INVITATIONAL TRAVEL ORDER(S), SPECIAL INSTRUCTIONS, FUND CITE(S), AND SPLIT BETWEEN TYPES AND PURPOSE OF TRAVEL AS SPECIFIED IN 7. ABOVE, IF APPLICABLE.

9. CRITERIA IDENTIFYING APPROVAL LEVELS IS CONTAINED IN ER 55-1-2. IF PREAPPROVED BY ASA(CW), INDICATE PREAPPROVAL MECHANISM, E.G., QUARTERLY FOREIGN TRAVEL PLAN, DECISION MEMORANDA, ETC.

10. LIST NAME(S) AND ORGANIZATION SYMBOL(S) OF OTHER USACE PARTICIPANTS, IF KNOWN. IF UNKNOWN, INDICATE "UNKNOWN".

11. INDICATE AUTHORIZED SIGNATURE BLOCK OF COMMANDER OR DIRECTOR. ENG FORM 4960-R WILL BE SIGNED BY THE COMMAND OR DIRECTOR OF THE MSC, DISTRICT, LABORATORY, OR FOA AND WILL CERTIFY THAT (a) THE COMMANDER OR DIRECTOR RECOMMENDS APPROVAL OF THE TRAVEL AND (b) DISAPPROVAL OF THE REQUEST WILL ADVERSELY IMPACT MISSION ACHIEVEMENT.

12. PROVIDED BY HQUSACE, AS APPLICABLE.

13. PROVIDED BY HQDA, AS APPLICABLE.